

# Infant Daily Report

CAREGIVER \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

## PARENT'S SECTION:

Child's Name \_\_\_\_\_ Special Instructions for today: None ☐ Yes ☐

My child woke up at \_\_\_\_\_ (time). My child's last bottle was at \_\_\_\_\_ and

My child's last food was at \_\_\_\_\_. My child arrived at the center at \_\_\_\_\_.

\_\_\_\_\_ We are riding the bus this afternoon. \_\_\_\_\_ We are NOT riding the bus this afternoon.

## DAY'S ACTIVITIES

FEEDINGS:		SLEEPING:	
Time:	I ate:	Time laid down:	Time woke up:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## DIAPER CHANGES:

Time: \_\_\_\_\_ Urinate: \_\_\_\_\_ BM \_\_\_\_\_

_____
_____
_____
_____
_____
_____
_____
_____

## DISPOSITION

AM	PM
Happy	Happy
Playful	Playful
Cuddly	Cuddly
Sad	Sad
Fussy	Fussy
Active	Active
Aggressive	Aggressive
Tired	Tired

## ITEMS NEEDED

_____	Diapers
_____	Wipes
_____	Food
_____	Snacks
_____	Juice
_____	Formula
_____	Pants
_____	Shirt
_____	Sweater
_____	Shoes
_____	Socks
_____	Mittens
_____	Hat

## COMMENTS

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